

SOUTHPORT ARGYLE LAWN TENNIS CLUB

Argyle Road, Southport, PR99LH

www.argyletennis.net

email: saltcquery@outlook.com social media: @argyletennis

MEMBER NAME \_\_\_\_\_\_

ADDRESS AND POSTCODE

TELEPHONE							
	MAIL ADDRESS						
NAME OF PARENT (IF APPLICABLE)							
D.O.B. IF UNDER 18							
	DARD (PLEASE CI						
BEGINNER	TEAM PLAYER	INTERMEDIATE	EXPERIENCED				
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We are continuing to offer special Early Bird prices for 2024!

	Early bird offer if you join by June 1 <sup>st</sup> 2024	TICK
£180	£100	
£60	£35	
£85	£35	
£30	£20	
£90	£40	
£70	£70	
£50	£50	
£20	£20	
· · · ·	£60 £85 £30 £90 £70 £50	£60 £35   £85 £35   £30 £20   £90 £40   £70 £70   £50 £50

Preferred initial method of payment - Bank transfer- Sort code 60-20-11 Account no. 04027469

Please reference payment with name and membership type eg Jones Table Tennis

Alternatively you can pay by cheque - made payable to 'Southport Argyle Tennis Club'

Please return completed forms to Membership Secretary, Charlotte Preston 47, Emmanuel Road, Southport, PR99RP



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## Emergency Contact –

Name and telephone number.

## **RELEVANT HEALTH PROBLEMS:**

Have you had any major health problems in the past or are you currently dealing with the medical profession?

Such problems might include high or low blood pressure, recent surgery, epilepsy, diabetes, serious injury or accident, asthma, ulcers, hernias, arthritis, problems with the back, the heart, knees, eyes, ears or mental health.

Please give further information on any issues indicated above that you want to make the club aware of, or anything else that you wish to bring to your clubs attention:

Please tick this box if you <u>DO NOT</u> wish to declare physical and/or mental health information:

## **GDPR Statement**

In order to comply with the General Data Protection Regulations, it is necessary for us to check whether or not you are happy for us to retain your contact details, and to send you information that we think may be useful to you, including training and events, and relevant updates. We only hold information when it is necessary to do so and when you have given permission to do so.

I hereby apply for membership of the Southport Argyle Lawn Tennis Club. Please note that this is subject to agreement by Argyle Lawn Tennis Club Committee.

I agree to be bound by the Club Rules, Diversity and Inclusion Policy and Safeguarding Policy including the Codes of Conduct. Please refer to all these documents, including our Privacy Policy regarding the processing and retention of your data, which can be found on the club noticeboard and website.

I confirm my understanding and acceptance of all health questions. Please mark with a cross if signing digitally or print out and sign

SIGNATURE \_\_\_\_\_\_

DATE\_\_\_\_\_